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Bib Data Sheet

CONFIRMATION NO. 3629

SERIAL NUMBER 09/813,669	FILING DATE 03/21/2001 RULE	CLASS 709	GROUP ART UNIT 2152	ATTORNEY DOCKET NO. 041-514-L
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## APPLICANTS

Kathryn Ann McDonald, Yorba Linda, CA;  
 Leonard Eugene Eismann, Rancho Santa Margarita, CA;  
 Sharon Marie Lee, Mission Viejo, CA;

\*\* CONTINUING DATA *None M.S.*\*\* FOREIGN APPLICATIONS *None M.S.*IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 04/30/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> <i>ad</i>	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> <i>ad</i> <input type="checkbox"/> Met after allowance <i>Maura Shadwell, M.S.</i> Examiner's Signature Initials				

## ADDRESS

ALFRED W. KOZAK  
 UNISYS CORPORATION  
 MS 1000  
 10850 VIA FRONTERA  
 SAN DIEGO, CA 92127  
*# 27201*

## TITLE

Method for calculating memory requirements for thin client sizing tool

FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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